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Bib Data Sheet

CONFIRMATION NO. 9452

SERIAL NUMBER 09/966,349	FILING DATE 09/28/2001 RULE	CLASS 370	GROUP ART UNIT 2616	ATTORNEY DOCKET NO. 10559- 487001/P11470
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\*\* CONTINUING DATA \*\*\*\*\*

NoneKM

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NoneKM

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/05/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	MA	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature _____ Initials _____		10	31	6

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## TITLE

MULTIPROTOCOL DECAPSULATION/ENCAPSULATION CONTROL STRUCTURE AND PACKET  
 PROTOCOL CONVERSION METHOD

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
RECEIVED 1320		